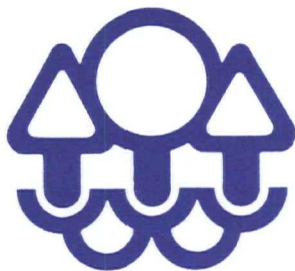


GW
5/17/85

US EPA RECORDS CENTER REGION 5



430070

Minnesota Pollution Control Agency

February 19, 1985

EXECUTIVE SUMMARY
Watkins, Incorporated
MND006158703

Situation

Watkins, Incorporated, located in Winona, Minnesota, manufactures food products, cleaning products, health and beauty products, plant products, insecticides, and gift collections. The Company is a small quantity generator of waste lube oil and waste fuel oil. There are two types of waste fuel oil: that used to rinse nonleaded paint brushes and that mixed with emulsion degreaser and dry cleaning grade perchloroethylene.

In February, 1983, approximately 200 gallons of fuel oil were released from an on-site storage tank. About 150 gallons of oil were recovered and barrelled. Three to four inches of sand were spread over the spill area and later cleaned up and thinspread on the property.

Inspection Priority Recommendation

Very little information pertaining to past waste management practices was available. Waste fuel oil used to be used for weed control along the railroad right-of-way. Waste maintenance oil was supposedly given to a person who burned it. The Company has had difficulty in identifying disposal options for their hazardous wastes. Minnesota Pollution Control Agency staff have worked with the Company to resolve the problem. Therefore, a low (pending) inspection priority is assessed to the site. A low potential hazard was assessed to the site because of the minimum amount of information available about past waste management practices and because there are no wells in the immediate vicinity.

Phone: _____

1935 West County Road B2, Roseville, Minnesota 55113-2785

Regional Offices • Duluth/Brainerd/Detroit Lakes/Marshall/Rochester

Equal Opportunity Employer





POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 1 - SITE INFORMATION AND ASSESSMENT

I. IDENTIFICATION

01 STATE 02 SITE NUMBER
MN D006158703

II. SITE NAME AND LOCATION

01 SITE NAME (Legal, common, or descriptive name of site) Watkins Products, Inc.		02 STREET, ROUTE NO., OR SPECIFIC LOCATION IDENTIFIER 150 Liberty St.			
03 CITY Winona	04 STATE MN	05 ZIP CODE 55987	06 COUNTY Winona	07 COUNTY CODE 169	08 CONG. DIST. 01
09 COORDINATES LATITUDE 44°03'00.0"		LONGITUDE 91°32'41.5"		Winona West 7.5 min. Quad	
10 DIRECTIONS TO SITE (Starting from nearest public road) From Hwy. 61: Go east on 6th St. to Liberty St., go North on Liberty St. to site.					

III. RESPONSIBLE PARTIES

01 OWNER (If known) Jacobs Management Corp.		02 STREET (Business, mailing, residential) 615 N.E. Marshall			
03 CITY Minneapolis	04 STATE MN	05 ZIP CODE 55415	06 TELEPHONE NUMBER 16121379-0322		
07 OPERATOR (If known and different from owner) Watkins Products Inc.		08 STREET (Business, mailing, residential) 150 Liberty Street			
09 CITY Winona	10 STATE MN	11 ZIP CODE 55987	12 TELEPHONE NUMBER 16071457-3300		
13 TYPE OF OWNERSHIP (Check one) <input checked="" type="checkbox"/> A. PRIVATE <input type="checkbox"/> B. FEDERAL: _____ (Agency name) <input type="checkbox"/> C. STATE <input type="checkbox"/> D. COUNTY <input type="checkbox"/> E. MUNICIPAL <input type="checkbox"/> F. OTHER: _____ (Specify) <input type="checkbox"/> G. UNKNOWN					
14 OWNER/OPERATOR NOTIFICATION ON FILE (Check all that apply) <input checked="" type="checkbox"/> A. RCRA 3001 DATE RECEIVED: 07/15/80 MONTH DAY YEAR <input checked="" type="checkbox"/> B. UNCONTROLLED WASTE SITE (CERCLA 103 c) DATE RECEIVED: 05/01/81 MONTH DAY YEAR <input type="checkbox"/> C. NONE					

IV. CHARACTERIZATION OF POTENTIAL HAZARD

01 ON SITE INSPECTION <input checked="" type="checkbox"/> YES DATE 08/13/81 MONTH DAY YEAR <input type="checkbox"/> NO		02 BY (Check all that apply) <input type="checkbox"/> A. EPA <input type="checkbox"/> B. EPA CONTRACTOR <input checked="" type="checkbox"/> C. STATE <input type="checkbox"/> D. OTHER CONTRACTOR <input type="checkbox"/> E. LOCAL HEALTH OFFICIAL <input type="checkbox"/> F. OTHER: _____ (Specify) CONTRACTOR NAME(S): _____			
02 SITE STATUS (Check one) <input checked="" type="checkbox"/> A. ACTIVE <input type="checkbox"/> B. INACTIVE <input type="checkbox"/> C. UNKNOWN		03 YEARS OF OPERATION 1840 (begin) 1911 (present) currently operating BEGINNING YEAR ENDING YEAR			
04 DESCRIPTION OF SUBSTANCES POSSIBLY PRESENT, KNOWN, OR ALLEGED OLW (persistent) fuel oil (flammable/toxic)					
05 DESCRIPTION OF POTENTIAL HAZARD TO ENVIRONMENT AND/OR POPULATION ground water (contamination)					

V. PRIORITY ASSESSMENT Potential Hazard: Low

01 PRIORITY FOR INSPECTION (Check one. If high or medium is checked, complete Part 2 - Waste Information and Part 3 - Description of Hazardous Conditions and Incidents) <input type="checkbox"/> A. HIGH (Inspection required promptly) <input type="checkbox"/> B. MEDIUM (Inspection required) <input checked="" type="checkbox"/> C. LOW (Inspect on time available basis) <input type="checkbox"/> D. NONE (No further action needed, complete current disposition form)			
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VI. INFORMATION AVAILABLE FROM

01 CONTACT Terry Mader		02 OF (Agency/Organization) MPCA - Solid + Hazardous Waste Division		03 TELEPHONE NUMBER 16121296-7358	
04 PERSON RESPONSIBLE FOR ASSESSMENT Susan M. Cedarleaf		05 AGENCY MPCA	06 ORGANIZATION Solid + Hazardous Waste Division	07 TELEPHONE NUMBER 16121297-1802	08 DATE 02/19/85 MONTH DAY YEAR





**POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS**

I. IDENTIFICATION

01 STATE	02 SITE NUMBER
MN	D006158703

II. HAZARDOUS CONDITIONS AND INCIDENTS

01 <input type="checkbox"/> A. GROUNDWATER CONTAMINATION	02 <input type="checkbox"/> OBSERVED (DATE _____)	<input type="checkbox"/> POTENTIAL	<input type="checkbox"/> ALLEGED
03 POPULATION POTENTIALLY AFFECTED: <u>20,000+</u>	04 NARRATIVE DESCRIPTION		

None Known
6 city wells are w/in a 3-mile radius at depths of 150' and 500'. There are also numerous private wells w/in the 3-mile radius.

01 <input type="checkbox"/> B. SURFACE WATER CONTAMINATION	02 <input type="checkbox"/> OBSERVED (DATE _____)	<input type="checkbox"/> POTENTIAL	<input type="checkbox"/> ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____	04 NARRATIVE DESCRIPTION		

No intakes

01 <input type="checkbox"/> C. CONTAMINATION OF AIR	02 <input type="checkbox"/> OBSERVED (DATE _____)	<input type="checkbox"/> POTENTIAL	<input type="checkbox"/> ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____	04 NARRATIVE DESCRIPTION		

N/A

01 <input checked="" type="checkbox"/> D. FIRE/EXPLOSIVE CONDITIONS	02 <input type="checkbox"/> OBSERVED (DATE _____)	<input checked="" type="checkbox"/> POTENTIAL	<input type="checkbox"/> ALLEGED
03 POPULATION POTENTIALLY AFFECTED: <u>workers (<500)</u>	04 NARRATIVE DESCRIPTION		

Storage of hazardous wastes indoors, in enclosed + locked building
Flammable hazardous wastes stored separately + locked.

01 <input checked="" type="checkbox"/> E. DIRECT CONTACT	02 <input type="checkbox"/> OBSERVED (DATE: _____)	<input checked="" type="checkbox"/> POTENTIAL	<input type="checkbox"/> ALLEGED
03 POPULATION POTENTIALLY AFFECTED: <u>workers (<500)</u>	04 NARRATIVE DESCRIPTION		

If spills/accidents occur, potential.

01 <input type="checkbox"/> F. CONTAMINATION OF SOIL	02 <input type="checkbox"/> OBSERVED (DATE: _____)	<input type="checkbox"/> POTENTIAL	<input type="checkbox"/> ALLEGED
03 AREA POTENTIALLY AFFECTED: _____ (Acres)	04 NARRATIVE DESCRIPTION		

N/A

01 <input type="checkbox"/> G. DRINKING WATER CONTAMINATION	02 <input type="checkbox"/> OBSERVED (DATE: _____)	<input type="checkbox"/> POTENTIAL	<input type="checkbox"/> ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____	04 NARRATIVE DESCRIPTION		

None Known

01 <input type="checkbox"/> H. WORKER EXPOSURE/INJURY	02 <input type="checkbox"/> OBSERVED (DATE: _____)	<input type="checkbox"/> POTENTIAL	<input type="checkbox"/> ALLEGED
03 WORKERS POTENTIALLY AFFECTED: _____	04 NARRATIVE DESCRIPTION		

See "D" + "E"

01 <input type="checkbox"/> I. POPULATION EXPOSURE/INJURY	02 <input type="checkbox"/> OBSERVED (DATE: _____)	<input type="checkbox"/> POTENTIAL	<input type="checkbox"/> ALLEGED
03 POPULATION POTENTIALLY AFFECTED: _____	04 NARRATIVE DESCRIPTION		

Access restricted.



POTENTIAL HAZARDOUS WASTE SITE
PRELIMINARY ASSESSMENT
PART 3 - DESCRIPTION OF HAZARDOUS CONDITIONS AND INCIDENTS

I. IDENTIFICATION

D1 STATE D2 SITE NUMBER
MN D006158703

II. HAZARDOUS CONDITIONS AND INCIDENTS (Continued)

01 ☐ J. DAMAGE TO FLORA
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

N/A

01 ☐ K. DAMAGE TO FAUNA
04 NARRATIVE DESCRIPTION (include name(s) of species)

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

N/A

01 ☐ L. CONTAMINATION OF FOOD CHAIN
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

N/A

01 ☒ M. UNSTABLE CONTAINMENT OF WASTES
(Spills/runoff/standing liquids/leaking drums)

02 ☒ OBSERVED (DATE: 02-17-83)

☐ POTENTIAL

☐ ALLEGED

03 POPULATION POTENTIALLY AFFECTED: -0-

04 NARRATIVE DESCRIPTION

Reported a spill of 200 GA of fuel oil from storage tank, 150 GA recovered + drummed. Sand was bagged over area to soak up rest of oil and later this spread on property.

01 ☐ N. DAMAGE TO OFFSITE PROPERTY
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

N/A

01 ☐ O. CONTAMINATION OF SEWERS, STORM DRAINS, WWTPs
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

No sewers nearby spill ("M").

01 ☐ P. ILLEGAL/UNAUTHORIZED DUMPING
04 NARRATIVE DESCRIPTION

02 ☐ OBSERVED (DATE: _____)

☐ POTENTIAL

☐ ALLEGED

See "M"

05 DESCRIPTION OF ANY OTHER KNOWN, POTENTIAL, OR ALLEGED HAZARDS

None Known

III. TOTAL POPULATION POTENTIALLY AFFECTED: 2500

IV. COMMENTS

V. SOURCES OF INFORMATION (Cite specific references, e. g., state files, sample analysis, reports)

MPCA files

